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## **Building resilient health systems: lessons from international, national and local emergency responses to the Ebola epidemic in Sierra Leone.**

This project is a partnership between The London School of Hygiene & Tropical Medicine, London, UK and Njala University, Bo Campus, Sierra Leone.

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Ethics approval was granted from the London School of Hygiene & Tropical Medicine Ethics Committee and Njala University's Ethics Committee.

Between October 2016 and March 2019 data interviews were conducted with more than 70 international, national, district and chiefdom responders. Ethnographic work traced infection chains and narratives of survivors across Bo and Moyamba districts. More than 100 outbreak-response policy and guideline documents were analysed from international, national and district agencies.

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The **principal research questions** are:

- 1) How has the international Ebola-response, in its interaction with national and local responses, affected Sierra Leone's health system and its ability to respond to future shocks?
- 2) How can international, national and local emergency response mechanisms be utilised to build resilient health systems in Sierra Leone, and what are the lessons for other settings?

### ***Why is the research Important for Sierra Leone?***

To date, the evidence on the impact of international Ebola-response assistance in Sierra Leone, and the way it has enabled or hampered local responses, is almost non-existent. For example, it is not known how, why and in what ways local health systems were used, or not used; and it is not at all clear whether international assistance has strengthened local health systems or weakened them by building parallel structures and bypassing local institutions and relationships. The longer-term implications of this kind of assistance, especially beyond the immediate crisis, are thus unclear. To ensure that future responses of this kind are beneficial, it is important to learn lessons from Sierra Leone's experience of the Ebola-response.

### ***What is the wider relevance of the study?***

The lessons for Sierra Leone shed light on how outbreak response in fragile settings can be improved and underlying systems better supported.

Our findings have particular relevance for the current Ebola crisis in North Kivu, Democratic Republic of Congo.

### ***Methods and data collection***

Our study explores a range of factors including: the extent to which responses were informed by local concerns and perceptions of emergency-response systems; whether external interventions sought to work within or with local systems (and whether this resulted in the building of parallel response structures); whether external interventions ultimately weakened and made the health system less resilient by, for example, taking

locally qualified staff away from public sector systems or by diverting resources from other ongoing health requirements (including routine maternal and child health and common preventable diseases).

**Q1: How has the international Ebola-response affected Sierra Leone's health system, and its ability to withstand future shocks?**

Research Objectives	Data collection activities, methods and analysis
1. To examine the <b>extent, nature, motivations and drivers of the policy response</b> to Ebola in Sierra Leone and their perceived effect on the epidemic progression and on health system strength and resilience	<b>A) Multidisciplinary exploration of i) concepts and literature on resilience</b> in relation to health systems and health systems strengthening; ii) <b>medical humanitarianism and ethnographic literature</b> on health, sickness and misfortune in Sierra Leone and neighbouring countries. This review will enable critical engagement with the assumptions embedded in the health systems literature.
2. To examine the level of <b>coordination, oversight and regulatory mechanisms</b> for the international response and explore their perceived effect on <b>health systems</b> strengthening and resilience.	<b>B) Development of multidisciplinary analytical approach to guide data collection and analysis.</b> Informed by A) and in discussion with the multidisciplinary project team and Advisory Group.  <b>C) Analysis of available national and district policy documents</b> (including of donors, NGOs and UN agencies) <b>and secondary data synthesis</b> (surveys, needs assessments, routine data).  <b>D) Analysis of OECD Creditor Reporting System data</b> on aid-flows for the Ebola Response in Sierra Leone to assess extent of financial commitments and whether they matched activities on the ground.  <b>E) Qualitative in-depth interviews</b> with subnational, national and international stakeholders on the <b>international response and its effect</b> on systems (c.100 in total).
3. To explore <b>what actions were implemented at the district, why and how</b> , and the extent to which they were affected by (or perceived to be affected by) international/national actions.	<b>F) Qualitative in-depth interviews</b> with agencies involved in <b>implementing the district emergency response</b> . c.20-25 interviews in each of two districts (total c.40-50).
4. Determine the <b>local issues which shaped what happened</b> during the Ebola epidemic (e.g. structural factors, material conditions, cultural perceptions, actual behaviour).	<b>G) Chiefdom and village level narrative interviews about the Ebola-response including</b> front-line health workers and a wide range of community members describing what happened and how they viewed and engaged in emergency-response activities. Ethnographic research methods will guided the collection and analysis of data which identified and tracked key infection-chain outbreaks in the two districts.

**Q2: How can international, national and local emergency response mechanisms be utilised to build resilient health systems in Sierra Leone? What lessons emerge?**

Research Objectives	Data collection activity, method and analysis
5. Develop conclusions, in the context of Sierra Leone, on <b>what constitutes a resilient health system</b> and how this may change in the face of an emergency.	<b>H) Synthesis of findings across objectives 1-4 and discussion of interpretation and analysis</b> with our <b>multi-disciplinary</b> research and advisory teams and with local stakeholders: Njala staff attend an analysis and writing workshop in London
6. Identify <b>lessons</b> on how to respond to emergencies without undermining existing health systems capacities and strengthening initiatives.	<b>I) Development of lessons to inform the building of resilient health systems</b> in preparation for and in the wake of emergencies: 2 dissemination workshops (in London and Njala) <b>J) Testing of findings</b> against WHO emergency response guidelines.